

City of Gustavus Room Tax and Sales Tax Return

ALL INFORMATION SHALL REMAIN CONFIDENTIAL

Business _____

Owner _____

Address _____

Phone 907-697-_____

_____ Summer Merchant _____ Year-round Merchant
If summer merchant please provide winter address and phone number.

For Month Ending:

____ / ____ / ____

Calendar Year 2004

- | | | |
|--|----|--|
| 1. Gross Room Sales | \$ | |
| <small>DO NOT INCLUDE BED TAX COLLECTED</small> | | |
| 2. Less Exempt Room Sales | \$ | |
| 3. Net Taxable Room Sales | \$ | |
| <small>Line 1 minus line 2</small> | | |
| 4. Taxes Due @4% Bed Tax (Multiply line 3 by 4%) | \$ | |
| 5. Gross Sales | \$ | |
| <small>DO NOT INCLUDE SALES TAX COLLECTED</small> | | |
| 6. Less Exempt Sales | \$ | |
| 7. Net Taxable Sales | \$ | |
| <small>Line 5 minus line 6</small> | | |
| 8. Taxes Due @2% Sales Tax (Multiply line 7 by 2%) | \$ | |
| 9. Total Room and Sales Tax Due | \$ | |
| 10. Less 2% Seller's Compensatory Collection Discount | \$ | |
| <small>Deduction may not exceed \$100.00 for any reporting period and may not be taken if any sales tax, penalty or interest is due for any previous reporting period.</small> | | |
| 11. Add Penalty and Interest for late return | \$ | |
| <small>Penalty @5% per month & Interest @15% per year</small> | | |
| 11. TOTAL AMOUNT DUE | \$ | |
| 12. TOTAL PAID WITH RETURN | \$ | |

Completed forms are to be received in the City Clerk's office on or before the last day of the month following the filing month, unless the last day of the month is a Saturday, Sunday, or federal, state or City holiday in which case the due date will be extended to the next business day. **Room Tax and Sales Tax Returns shall be filed for each month** unless the operator is allowed or directed by the City Clerk to file for a different time period. Sign and deliver or mail the same to the City Clerk.

Penalty and interest due on taxes paid after the due date is 5 per cent (5%) per month or any fraction thereof, until a total late payment penalty of twenty-five per cent (25%) has accrued. In addition to these penalties, interest at the rate of fifteen per cent (15%) per year on the delinquent tax is collected.

I DECLARE THAT THIS RETURN (INCLUDING ANY ACCOMPANYING STATEMENTS) HAS BEEN EXAMINED BY ME AND TO THE BEST OF MY KNOWLEDGE AND BELIEF IS TRUE, CORRECT AND A COMPLETE RETURN.

Owner or Agent _____

Date _____

Make Checks Payable to:

The City of Gustavus, P.O. Box 1, Gustavus, Alaska 99826

PLEASE INCLUDE TWO COPIES of THIS FORM WITH PAYMENT